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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Aut	nonzeu Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
WOMEN SPEAK OUT	PAC		
ADDRESS (number and street)	1200 NEW HAMPSHIRE AV	/E NW	
▼ Check if different	SUITE 750		
than previously reported. (ACC)	WASHINGTON		DC 20036 -
2. FEC IDENTIFICATION N	UMBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲
C C00530766		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15 Quarterly Report (0	01)	20 (M4) Jul 20 (M7	
July 15 Quarterly Report (0	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (\)	YE)Electio	n on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Electio	n on	in the State of
5. Covering Period 1		through 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the	nis Report and to the best of Buchanan, Emily, , ,	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure			
Signature of Treasurer	nanan, Emily, , ,	[Electronically Filed]	Date 05 / 17 / 2017
NOTE: Submission of false, erron	neous, or incomplete information	n may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name WOMEN SPEAK OUT PAC 11 29 2016 12 31 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 496911.89 January 1, 2016 (b) Cash on Hand at 46620.84 Beginning of Reporting Period..... 749.95 1256627.85 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1753539.74 47370.79 6(a) and 6(c) for Column B)..... 36491.92 1742660.87 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 10878.87 10878.87 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 35918.99 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN SPEAK OUT PAC

eport Covering the Period: From:	29 2016 To	: 12 31 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(i) Itemized (use Schedule A)	350.00	1177294.43
(ii) Unitemized(iii) TOTAL (add	205.00	68494.74
Lines 11(a)(i) and (ii)	555.00	1245789.17
(b) Political Party Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	555.00	1245789.17
	0.00	0.00
All Loans Received	0.00	0.00
1 1	0.00	0.00
(Carry Totals to Line 37, page 5)	194.95	10838.68
to Federal Candidates and Other		
	0.00	0.00
Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	I. Receipts Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	I. Receipts Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from School III)		Calonaa Tour to Date		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
(i) Tederal Share	45 45 45	4 4 4		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	36456.92	655036.79		
Expenditures(c) Total Operating Expenditures	30430.92	053036.78		
(add 21(a)(i), (a)(ii), and (b))▶	36456.92	655036.79		
. Transfers to Affiliated/Other Party	7	4 4 4		
Committees Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures	4 4	4 4		
(use Schedule E)Coordinated Party Expenditures	0.00	1087589.08		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
·	7 7 7	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other	3.00	4 4		
Than Political Committees	35.00	35.00		
(b) Political Party Committees		200		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds	, , , , , , , , , , , , , , , , , , , ,	7 7 7		
(add Lines 28(a), (b), and (c))	35.00	35.00		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
	4 4	4 4		
Federal Election Activity (52 U.S.C. § 30101(20)))			
(a) Allocated Federal Election Activity (from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid				
Entirely With Federal Funds	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	36491.92	1742660.87		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	36491.92	1742660.87		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 555.00 1245789.17 (from Line 11(d), page 3) 34. Total Contribution Refunds 35.00 35.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 1245754.17 520.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 36456.92 655036.79 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 10838.68 194.95 (from Line 15, page 3)..... 38. Net Operating Expenditures 36261.97 644198.11 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		6	OF		13	
(check only one)											
	X	11a		11b		11c		12	2		
		13		14		15		16	6		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle In Abuid, Julia, , , Mailing Address P.O. Box 921495 City Sylmar FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: 2016 Primary General Other (specify)	State Zip Code CA 91392-1495 C Occupation (for Individual) Retired Aggregate Year-to-Date 220.00	Date of Receipt 12 27 2016 Transaction ID: SA11AI.9230 Amount of Each Receipt this Period 50.00 Memo Item
Full Name of Individual (Last, First, Middle In Harrison, Nancy, , , Mailing Address 29 Olde Paltzer Lane City Appleton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Homemaker Receipt For: 2016 Primary General Other (specify) Full Name of Individual (Last, First, Middle In	State Zip Code WI 54913-7114 C Occupation (for Individual) Homemaker Aggregate Year-to-Date 300.00	Date of Receipt 12 30 2016 Transaction ID: SA11AI.9233 Amount of Each Receipt this Period 300.00 Memo Item
Mailing Address City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary Other (specify)	State Zip Code C Occupation (for Individual) Aggregate Year-to-Date	Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional))	350.00
TOTAL This Period (last page this line number	only)	350.00

S 17

Use separate schedule(s) Check only one) Table	S	CHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER:	:		PAGE	7 OF	F 13	
Detailed Surmary Page 28 28 28 28 28 28 28 2	IT	EMIZED DISBURSEMENTS			I `								
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full PLAC Full Name (Last, First, Middle Initial) A. Authorize.net Mailing Address P.O. Box 947 City American Fork Purpose of Disbursement Credit Card processing fees Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. Chain Bridge Bank Mailing Address 1445 McLaughlin Ave City McLean Purpose of Disbursement Wire Transfer fee Candidate Name Category/ Type Disbursement Disbursement Disbursement Office Sought: Full Name (Last, First, Middle Initial) C. Design 4 Advertising Mailing Address 1445 McLaughlin Ave City McLean Purpose of Disbursement Disbursement Office Sought: Full Name (Last, First, Middle Initial) C. Design 4 Advertising Mailing Address 1445 McLaughlin Ave City McLean Purpose of Disbursement Disbursement Disbursement Office Sought: Full Name (Last, First, Middle Initial) C. Design 4 Advertising Mailing Address 100 N Collins St City Full Name (Last, First, Middle Initial) C. Design 4 Advertising Mailing Address 100 N Collins St City Fund Cit					x					L			
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Full Name (Last, First, Middle Initial) A. Authorize.net Mailing Address P.O. Box 947 City American Fork Purpose of Disbursement Credit Card processing fees Candidate Name Office Sought: House Disbursement Primary General Purpose of Disbursement 136.85 Chain Bridge Bank Mailing Address 1445 McLaughlin Ave City McLean Prisaident Primary General Purpose of Disbursement Normal Transfer fee Candidate Name Office Sought: House Disbursement For: Senate Prisaident Primary General Purpose of Disbursement Normal Transfer fee Candidate Name Office Sought: House Disbursement For: Senate Prisaident Dither (specify) Full Name (Last, First, Middle initial) Full Name (Last, First, Middle initial) C. Design 4 Advertising Mailing Address 106 N Collins St City State Zip Code Primary General Primary		• • • • • • • • • • • • • • • • • • • •											
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American Fork UT 84003-0947 Purpose of Disbursement Credit Card processing fees Calcagory/ Type Office Sought: House Primary General Other (specify) ▼ State: Disfrict: Amount of Each Disbursement this Period Full Name (Last, First, Middle Initial) B. Chain Bridge Bank Malling Address 1445 McLaughlin Ave City State Zip Code VA Zinot VI State Zinot Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary General Cher (specify) FEC Identification Number Category/ 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/		Mailing Address P.O. Box 947					12		02	<u>L.</u>	2016		
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B. Chain Bridge Bank Mailing Address 1445 McLaughlin Ave City McLean Purpose of Disbursement Wire Transfer fee Candidate Name Office Sought: Fell Name (Last, First, Middle Initial) Fell dentification Number Category/ Type Office Sought: Fell Name (Last, First, Middle Initial) Category/ Type Office Sought: Fell Name (Last, First, Middle Initial) Cher (specify) Disbursement For: Senate Primary General Other (specify) Date of Disbursement FEC Identification Number Category/ Type Transaction ID: SB21B.9244 Amount of Each Disbursement this Period Memo Item Fect Identification Number Category/ Type Date of Disbursement FEC Identification Number Category/ Type Date of Disbursement Initial Primary Date of Disbursement Category/ Type Fect Identification Number Fect Identification Number Category/ Type Fect Identification Number Category/ Type Office Sought: House Plant City Purpose of Disbursement Edits on flyer Candidate Name Office Sought: House Primary General Other (specify) Memo Item Subtrotal of Disbursements This Page (optional)			Other (spe	cify) 🔻			Me	mo Item					
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SCHEDULE B (FEC Form 3X)				NE NUMBE	₹:		PAGE	8 OF	- 13		
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the		only one)		. —	۰. ۲				
		Summary Page		22 28a 28b	23		26	27 30b			
Anninformation coming from such Deposits and Chate											
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NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)					(D: 1						
A. Fitzgerald, Tami, , ,	750			M		D D .		Y Y Y	7		
Mailing Address 1200 New Hampshire Ave NW St	e 750			12		05		2016			
City Washington	State DC	Zip Code 20036		FEC	Identifica	tion Nur	mber				
Purpose of Disbursement		20036									
State Director Reimbursement			Г					22.12			
Candidate Name			Category	-	ransacti			.9243 ent this Pe	eriod		
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B. Greco, Grayson, , ,		Date	of Disbu	rsement	t						
Greed, Grayson, , ,		M	M / E	D D	/ Y	Y Y Y					
Mailing Address 1200 New Hampshire Ave NW S	12		05	L	2016						
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Washington Purpose of Disbursement	20036										
Field Director Reimbursement											
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President State: District:	Other (spe	ecity)		l N	Memo Item						
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C. Headway Workforce Solutions				Date	of Disbu	rsement		Y W Y W Y			
Mailing Address 421 Fayetteville St #1020				12		05	L	2016	_		
City	State	Zip Code		FEC	Identifica	tion Nu	mher				
Raleigh	NC	27601						-			
Purpose of Disbursement Director Pay			ransacti	on ID :	SB21B	.9235					
Candidate Name			Category/ Type	Amou	nt of Ea	ch Disbi	urseme	ent this Pe	eriod		
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	State DC	Zip Code 20036			FEC Id	entificatio	n Number					
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Α.	Intuit			Date of Disbursement									
	Mailing Address 2700 Coast Ave				7 [12 01 2016							
	City	State	Zip Code	+_									
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_	Full Name (Last, First, Middle Initial)												
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	Mailing Address 2700 Coast Ave				\dashv [12 02 2016							
	City Mountain View	State Zip Code CA 94043			F	FEC Identification Number							
	Purpose of Disbursement			C									
	Credit Card processing fees					Transaction ID : SB21B.9246					6		
	Candidate Name		Α	Amount of Each Disbursement this Period					riod				
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	Senate	Primary	General				7	Ť	Ť	7		4	
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	credit card processing fees					C	nsactio	nn l	ID ·	SR211	B 02/	9	
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SCHEDULE B (FEC Form 3X)	lles	austa sala salada ()	FOR LINE NUMBER: PAGE 11 OF					13		
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NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial) A. Kirkman, Jason, , ,				Date of Disbursement						
Wikiliali, Jasoli, , ,				M M / D D / Y Y Y Y						
Mailing Address 1200 NEw Hampshire Ave				12 05 2016						
Ste 750		1								
,	State DC	Zip Code 20036		FEC Ident	ification N	umber				
Purpose of Disbursement		20030		С						
Field Director Reimbursement					action ID	· SD21D (2240			
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B. Williams, Petrina, , ,		Date of D	isburseme	nt						
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Purpose of Disbursement Field Director Reimbursement			· · ·	C						
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			Category/ Type	Amount of Each Disbursement this Per						
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	Primary	General			,	,				
President State: District:	Other (spec	CITY)		Memo	Item					
Full Name (Last, First, Middle Initial)										
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State: District:				Memo						
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SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 12
FOR LINE NUMBER: (check only one)

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OF

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington DC 20036 Transaction ID: SD10.4157 Outstanding Balance Beginning This Period 10500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 10500.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Loan for FEC Reporting Services Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.4110 5000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 5000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings Expense Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington DC 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.4318 5204.43 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 5204.43 20704.43 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE 13 OF

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X	10

13

NAME OF COMMITTEE (In Full)
WOMEN SPEAK OUT PAC

VOMEN SPEAK OUT PAC			
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			Original transactions put on SBA CC
Mailing Address 1200 New Hampshire Ave NW			-
Ste 750			
City Washington	State DC	Zip Code	
	DC	20036	Turning that ID, OD40 0005
Outstanding Balance Beginning This Period			Transaction ID : SD10.6625
8610.00			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	8610.00
B. Full Name (Last, First, Middle Initial) of Debtor of	Nature of Debt (Purpose):		
Susan B Anthony List, Inc.			Expense put on SBA CC
Mailing Address 1200 New Hampshire Ave NW			-
Ste 750			
City Washington	State	Zip Code 20036	
		20000	
Outstanding Balance Beginning This Period			Transaction ID : SD10.6756
4709.73			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	4709.73
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			To post Thrifty Car Rental Expense put on SBA Card
Mailing Address 1200 New Hampshire Ave NW Ste 750			
City	State	Zip Code	
Washington	DC	20036	
Outstanding Balance Beginning This Period			Transaction ID : SD10.9222
1894.83			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	1894.83
			1504.50
SUBTOTALS This Period This Page (optional)		>	15214.56
TOTALS This Period (last page this line number of	only)	>	35918.99
TOTAL OUTSTANDING LOANS from Schedule C	0.00		
ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ary Page (last page only) ▶	35918.99